

## **Application Data Sheet**

### **Application Information**

Application number::	Not Yet Assigned
Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	N/A
CD-ROM or CD-R?::	None
Sequence submission?::	Paper
Computer Readable Form (CRF)?::	No
Title::	INFORMATION MANAGEMENT AND MOVEMENT SYSTEM AND METHOD
Attorney Docket Number::	63134/P001CP2/10309809
Request for Early Publication?::	No
Request for Non-Publication?::	Yes
Small Entity?::	Yes
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

### **Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	John
Middle Name::	J.
Family Name::	Viola
City of Residence::	Keller
State or Province of Residence::	TX
Country of Residence::	US
Street of mailing address::	1203 Wellington Drive
City of mailing address::	Keller
State or Province of mailing address::	TX
Postal or Zip Code of mailing address::	76248

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Lee  
Middle Name:: R.  
Family Name:: Johnson  
City of Residence:: Plano  
State or Province of Residence:: TX  
Country of Residence:: US  
Street of mailing address:: 4300 Barnsley Drive  
City of mailing address:: Plano  
State or Province of mailing address:: TX  
Postal or Zip Code of mailing address:: 75093

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Richard  
Middle Name::  
Family Name:: Falcone  
City of Residence:: Addison  
State or Province of Residence:: TX  
Country of Residence:: US  
Street of mailing address:: 5505 Addison Circle  
City of mailing address:: Addison  
State or Province of mailing address:: TX  
Postal or Zip Code of mailing address:: 75001

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity

Given Name:: Jerald  
Middle Name:: B.  
Family Name:: Daniels  
City of Residence:: Austin  
State or Province of Residence:: TX  
Country of Residence:: US  
Street of mailing address:: 5 Concord Circle  
City of mailing address:: Austin  
State or Province of mailing address:: TX  
Postal or Zip Code of mailing address:: 78737

**Correspondence Information**

Correspondence Customer Number:: 000029053

**Representative Information**

Representative Customer Number:: 000029053

**Assignee Information**

Assignee name:: Evercom Systems, Inc.  
Street of mailing address:: 8201 Tristar Drive  
City of mailing address:: Irving  
State or Province of mailing address:: TX  
Postal or Zip Code of mailing address:: 75063

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date
This Application	Continuation-in-part	10/135,878	April 29, 2002